

EXHIBIT B

Neurontin Track One (Plaintiff / Prescriber / Expert Depos)
Ruggieri, Alexander MD (Defense Expert-Bulger)
12/5/2008

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1	1	3
1	UNITED STATES DISTRICT COURT	1
2	DISTRICT OF MASSACHUSETTS	2
3		3
4		4
5	In re: NEURONTIN MARKETING,)	5
6	SALES PRACTICES AND PRODUCTS)	6
7	LIABILITY LITIGATION)	7
8	-----) MDL Docket No. 1629	8
9	THIS DOCUMENT RELATES TO:) Master File No.	9
10) 04-10981	10
11	BULGER v. PFIZER, et al.,)	11
12	07-11426-PBS) Judge Patti B. Saris	12
13) Magistrate Leo T.	13
14	SMITH v. PFIZER, et al,) Sorokin	14
15	05-CV-11515-PBS)	15
16	-----	16
17		17
18	DEPOSITION OF ALEXANDER RUGGIERI, taken	18
19	at 999 Enchanted Way, Board Room 3,	19
20	Simi Valley, California, commencing at	20
21	9:10 A.M., Friday, December 5, 2008,	21
22	before Kathleen E. Barney, CSR #5698.	22
23		23
24	Job No. 183324	24
25	PAGES 1 - 330	25
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1	APPEARANCES OF COUNSEL:	1
2		2
3	FOR PLAINTIFFS:	3
4		4
5	FINKELSTEIN & PARTNERS	5
6	BY: KEITH L. ALTMAN	6
7	1279 ROUTE 300	7
8	BOX 1111	8
9	NEWBURGH, NEW YORK 12551	9
10	(845) 562-0203	10
11	KALTMAN@LAWAMPMMT.COM	11
12		12
13	FOR DEFENDANT PFIZER:	13
14		14
15	GOODELL, DEVRIES, LEECH & DANN, LLP	15
16	BY: RICHARD M. BARNES	16
17	MICHAEL WASICKO (Telephonically)	17
18	ONE SOUTH STREET	18
19	20TH FLOOR	19
20	BALTIMORE, MARYLAND 21202	20
21	(410) 783-4000	21
22	RMB@GDLDLAW.COM	22
23		23
24		24
25		25
		THE VIDEOGRAPHER: Good morning. We are taking the record at 9:10 a.m. on December 5, 2008. My name is David West and I represent Veritext National Deposition and Litigation Services. This deposition is being held at the Grand Vista Hotel at 999 Enchanted Way, Board Room No. 3, Simi Valley, California. The case is entitled In Re Neurontin Marketing Sales Practices and Products Liability Litigation, MDL Docket No. 1629. The deponent is Dr. Alexander Ruggieri. 09:11
		Would all counsel please identify themselves for the record, after which our court reporter, Kathy Barney of Veritext, will swear in the witness and we'll begin.
		MR. ALTMAN: This is Keith Altman on behalf of the Products Liability plaintiffs and also the Crone plaintiffs in the case of Crone versus Pfizer.
		MR. BARNES: Richard Barnes on behalf of Pfizer and Parke-Davis and in MDL and in Crone.
		MR. WASICKO: This is Michael Wasicko from Goodell DeVries on behalf of the Pfizer defendants.
		MS. BERMAN: This is Kendra Berman on behalf of Dr. Jennings in the Crone matter.
		THE VIDEOGRAPHER: Thank you. 09:12
		Ms. Court Reporter.

<p>5</p> <p>1 ALEXANDER RUGGIERI,</p> <p>2 a witness herein, having been duly sworn, was</p> <p>3 examined and testified as follows:</p> <p>4</p> <p>5 MR. ALTMAN: Before we begin, I just want to</p> <p>6 put one thing on the record.</p> <p>7 Recently, in the last few days, this case</p> <p>8 was noticed in the California State Court case of</p> <p>9 Crone versus Pfizer. Under California rules, we are</p> <p>10 not -- do not have the same time limitations as in</p> <p>11 the MDL case. I'll do everything in my power to</p> <p>12 conclude my examination by today, but in the event</p> <p>13 that I'm unable to, under the California rules I will</p> <p>14 hold the deposition open for follow-up questioning a</p> <p>15 a later date to be determined. 09:13</p> <p>16 MR. BARNES: We don't agree with that, but</p> <p>17 we will talk about that at a later date, so -- we</p> <p>18 have a course of dealing and understanding in this</p> <p>19 case, but go ahead. I am very comfortable that you</p> <p>20 can complete his deposition within the time allotted.</p> <p>21 MR. ALTMAN: I will do my best.</p> <p>22</p> <p>23 EXAMINATION</p> <p>24 BY MR. ALTMAN:</p> <p>25 Q. Dr. Ruggieri, how are you today? 09</p>	<p>7</p> <p>1 A. Yes.</p> <p>2 Q. And we'll take a look at it a little bit</p> <p>3 later.</p> <p>4 Have you had a chance to review that report?</p> <p>5 A. Yes. 09:14</p> <p>6 Q. Do you want to make any changes to that</p> <p>7 report or have you reviewed it and you're comfortab</p> <p>8 with its accuracy?</p> <p>9 A. I feel it's generally accurate. On</p> <p>10 re-review there might have some things I might hav</p> <p>11 said slightly differently that may have been</p> <p>12 ambiguous, but I think I could explain those if</p> <p>13 they're brought up.</p> <p>14 Q. Okay. Did you also review your original</p> <p>15 report in this case? 09:15</p> <p>16 A. Yes.</p> <p>17 Q. Okay. Is there any changes you want to mak</p> <p>18 to that, other than what we discussed at your</p> <p>19 deposition last time?</p> <p>20 A. No, I don't think so. 09:15</p> <p>21 Q. Okay. In your current report you rely upon</p> <p>22 a number of other expert reports; is that correct?</p> <p>23 A. I include those in forming some of the</p> <p>24 opinions in my report, yes.</p> <p>25 Q. And that would include the reports of 09</p>
<p>6</p> <p>1 A. Good. Thank you.</p> <p>2 Q. We met when I took your deposition about 11</p> <p>3 months ago, in January of this year; is that correct?</p> <p>4 A. It was January of 2008, yes.</p> <p>5 Q. And since then you've continued working on</p> <p>6 behalf of Pfizer in this matter?</p> <p>7 A. Not continuously. Somewhat sporadically.</p> <p>8 Most of the intensity of my work was around that</p> <p>9 deposition in January.</p> <p>10 Q. Okay. And just to clarify a couple of 09:</p> <p>11 things. You are noticed in a couple of specific</p> <p>12 cases, Bulger, Smith and Crone.</p> <p>13 Do you have any opinions that are specific</p> <p>14 to Bulger, Smith and Crone?</p> <p>15 A. I have -- those terms -- those names don't</p> <p>16 mean anything to me. I have no idea what those ca</p> <p>17 are.</p> <p>18 Q. So all of your opinions would be general and</p> <p>19 would be applicable to any case involving Neurontin</p> <p>20 is that correct? 09:14</p> <p>21 A. My opinions relate to the scientific</p> <p>22 questions put forth in the Neurontin case.</p> <p>23 Q. Okay. Dr. Ruggieri, you submitted a</p> <p>24 supplemental report recently in this case; is that</p> <p>25 correct? 09:14</p>	<p>8</p> <p>1 Dr. Gibbons?</p> <p>2 A. Dr. Gibbons.</p> <p>3 Q. And reports of Dr. Weiss-Smith?</p> <p>4 A. Dr. Weiss, yes.</p> <p>5 MR. BARNES: Hyphenated. 09</p> <p>6 BY MR. ALTMAN:</p> <p>7 Q. And did you do anything to independently</p> <p>8 verify any of the work done by Dr. Gibbons or</p> <p>9 Dr. Weiss-Smith or did you take their reports at face</p> <p>10 value? 09:15</p> <p>11 A. I relied on their findings and their</p> <p>12 methodology as they've described it.</p> <p>13 Q. Okay. So you've done nothing independently</p> <p>14 of them to look at any of the questions that they</p> <p>15 looked at in terms of working with data? 09</p> <p>16 A. I think that's correct, I did not retrieve</p> <p>17 any data or collect any data myself or load any data</p> <p>18 into my own analytic tools or capabilities.</p> <p>19 Q. Okay. Did you also review your deposition</p> <p>20 from your first -- 09:16</p> <p>21 A. Yes.</p> <p>22 Q. In January?</p> <p>23 A. Yes.</p> <p>24 Q. And I think I asked you, you did not do a</p> <p>25 report specifically in the Crone matter, correct? 09</p>

<p style="text-align: right;">277</p> <p>1 A. No.</p> <p>2 Q. Have you done one since you did this one to</p> <p>3 the FDA?</p> <p>4 A. You mean in the past six or seven months?</p> <p>5 No. 17:33</p> <p>6 Q. Okay. So this is the only time you've ever</p> <p>7 communicated directly with the FDA?</p> <p>8 A. That's correct.</p> <p>9 Q. Okay.</p> <p>10 A. Well, let me take that back. I had filed 17:</p> <p>11 adverse event reports. I have -- I think I've</p> <p>12 requested information. I -- but this issue was kind</p> <p>13 of close to the heart.</p> <p>14 Q. Fair enough. You put a lot of time in on</p> <p>15 it, I understand. 17:34</p> <p>16 Approximately two months after that, you</p> <p>17 received a report from the FDA, correct -- a respons</p> <p>18 from the FDA; is that correct?</p> <p>19 A. I received a response from Mr. Donald Dobbs</p> <p>20 a consumer safety officer from the FDA, not from</p> <p>21 Dr. Galson.</p> <p>22 Q. Did you receive this e-mail through your</p> <p>23 home computer?</p> <p>24 A. Yes.</p> <p>25 Q. Do you still have the e-mail on your home</p>	<p style="text-align: right;">279</p> <p>1 A. No.</p> <p>2 Q. Were you aware that you could do so?</p> <p>3 A. No.</p> <p>4 Q. The FDA's response, the last paragraph</p> <p>5 discusses your question about why the FDA advers</p> <p>6 AERS data was not used, correct?</p> <p>7 A. Yes.</p> <p>8 Q. Is that the sum and substance?</p> <p>9 A. Yes.</p> <p>10 Q. Is there anything in this paragraph from the</p> <p>11 FDA that says that adverse events cannot be used i</p> <p>12 detecting signals with respect to suicidality?</p> <p>13 A. There's nothing in here that prohibits the</p> <p>14 use of spontaneous adverse event reports for</p> <p>15 incorporating in the portfolio of signal detection 1</p> <p>16 approaches.</p> <p>17 Q. When you say "the portfolio of signal</p> <p>18 detection approaches," can we agree that some of</p> <p>19 those involve automated methods, as we discussed</p> <p>20 before, PRR and various other methods?</p> <p>21 A. Yeah, they -- well, that could be considered</p> <p>22 part of the portfolio. It could be looking at</p> <p>23 individual cases. It could be doing case reviews.</p> <p>24 It could be doing good quality studies in large</p> <p>25 health care databases. 17:37</p>
<p style="text-align: right;">278</p> <p>1 computer?</p> <p>2 A. I don't think I do.</p> <p>3 Q. So you printed it out and then through</p> <p>4 normal records retention activities did you delete</p> <p>5 the e-mail? 17:34</p> <p>6 A. I have cleaned my e-mail several times</p> <p>7 since -- I have e-mail size issues and archiving, so</p> <p>8 I don't think it's there at this time.</p> <p>9 Q. Okay. The third paragraph, the second</p> <p>10 sentence says: 17:35</p> <p>11 "If you feel strongly about the</p> <p>12 class labeling change being</p> <p>13 implemented for antiepileptic</p> <p>14 drugs, I would suggest that you</p> <p>15 attend and/or present at the 17:35</p> <p>16 upcoming meeting."</p> <p>17 Did I read that correct?</p> <p>18 A. Yes.</p> <p>19 Q. Did you attend the advisory committee</p> <p>20 meeting? 17:35</p> <p>21 A. I wanted very much to, but I couldn't.</p> <p>22 Q. Did you present at the meeting?</p> <p>23 A. I wanted to attend, but I couldn't.</p> <p>24 Q. Did you submit -- did you provide the FDA</p> <p>25 with any submission? 17:35</p>	<p style="text-align: right;">280</p> <p>1 Q. Okay. Could it also be understanding the</p> <p>2 population that is using the drug?</p> <p>3 A. As a -- understanding the population?</p> <p>4 Q. Could it be evaluating whether the</p> <p>5 populations using your drug are having detrimental</p> <p>6 effects to your drug that may be specific to a</p> <p>7 population?</p> <p>8 MR. BARNES: Objection. Vague as to</p> <p>9 "population".</p> <p>10 THE WITNESS: I think you included what I</p> <p>11 say. That is part and parcel of what I said.</p> <p>12 Because reviewing adverse event reports is reviewi</p> <p>13 the population that is using your drug.</p> <p>14 BY MR. ALTMAN:</p> <p>15 Q. Okay. Could it also include reviewing 1</p> <p>16 questions that may have been unanswered during t</p> <p>17 clinical trials?</p> <p>18 A. What do you mean by reviewing questions th</p> <p>19 are unanswered during clinical trials?</p> <p>20 Q. Are there sometimes -- in clinical trials, 17</p> <p>21 are there sometimes questions or concerns that ma</p> <p>22 not be fully understood at the time of the clinical</p> <p>23 trial and for which a company might implement a</p> <p>24 schema to monitor going forward to see if they can</p> <p>25 learn more information? 17:38</p>